



COMMUNITY DEVELOPMENT DEPARTMENT

Planning, Zoning and Building Safety

1415 Melody Lane, Bisbee, Arizona 85603

(520) 432-9240

Fax 432-9278

COCHISE COUNTY REZONING APPLICATION

Submit to: Cochise County Community Department
1415 Melody Lane, Building E, Bisbee, Arizona 85603

1. Applicant's Name: Mohammad Hodai
2. Mailing Address: P.O. Box 126 Elfrida, AZ 85610
Elfrida AZ 85610
City State Zip Code
3. Telephone Number of Applicant: (520) 457-8077
4. Telephone Number of Contact Person if Different: ()
5. Email Address: mo-idahe@yahoo.com
6. Assessor's Tax Parcel Number: 401-37-262 (Can be obtained from your County property tax statement) 401-37-263 → Application to join parcels has been submitted @ Assessor's office - Application Filed 1/5/2012
7. Applicant is (check one):
 - Sole owner: X
 - Joint Owner: _____ (See number 8)
 - Designated Agent of Owner: _____
 - If not one of the above, explain interest in rezoning: _____
7. If applicant is **not** sole owner, attach a list of all owners of property proposed for rezoning by parcel number. Include all real parties in interest, such as beneficiaries of trusts, and specify if owner is an individual, a partnership, or a corporation:
 - List attached (if applicable): _____
8. If applicant is **not** sole owner, indicate which **notarized** proof of agency is attached:
 - If corporation, corporate resolution designating applicant to act as agent: _____
 - If partnership, written authorization from partner: _____
 - If designated agent, attach a **notarized** letter from the property owner(s) authorizing representation as agent for this application.

9. Attach a proof of ownership for all property proposed for rezoning. Check which proof of ownership is attached:
- Copy of deed of ownership: X *Attached*
 - Copy of title report: _____
 - Copy of tax notice: _____
 - Other, list: _____

10. Will approval of the rezoning result in more than one zoning district on any tax parcel?

- Yes _____ No X

11. If property is a new split, or the rezoning request results in more than one zoning district on any tax parcel then a copy of a survey and associated legal description stamped by a surveyor or engineer licensed by the State of Arizona must be attached.

12. Is more than one parcel contained within the area to be rezoned? Yes _____ No X

- If yes and more than one property owner is involved, have all property owners sign the attached consent signature form.

13. Indicate existing Zoning District for Property: TR-36

14. Indicate proposed Zoning District for Property: RV-4

*Application for
Zoning
submitted on
1/5/2012*

Note: A copy of the criteria used to determine if there is a presumption in favor of or against this rezoning is attached. Review this criteria and supply all information that applies to your rezoning. Feel free to call the Planning Department with questions regarding what information is applicable.

15. Comprehensive Plan Category: category D (A County planner can provide this information.)

16. Comprehensive Plan Designation or Community Plan: category D, Plan Rural (A County planner can provide this information.)

Note: in some instances a Plan Amendment might be required before the rezoning can be processed. Reference the attached rezoning criteria, Section A.

17. Describe all structures already existing on the property: shed

18. List all proposed uses and structures which would be established if the zoning change is approved. Be complete. You may want to attach a site plan: House, Accessory structures

19. Are there any deed restrictions or private covenants in effect for this property?

- No X Yes ~~_____~~
- If yes, is the proposed zoning district compatible with all applicable deed restrictions/private covenants? Yes _____ No _____

- Provide a copy of the applicable restrictions (these can be obtained from the Recorder's office using the recordation Docket number)

20. Which streets or easements will be used for traffic entering and exiting the property?

The property Does have legal Access & there ~~is~~ is
a graded road on the legal easement Accessing the property

21. What off-site improvements are proposed for streets or easements used by traffic that will be generated by this rezoning? None

22. How many driveway cuts do you propose to the streets or easements used by traffic that will be generated by this rezoning? None

23. Identify how the following services will be provided:

* Property is currently undeveloped

Service	Utility Company/Service Provider	Provisions to be made
Water	City CIGNA	
Sewer/Septic	composting	need permit
Electricity	Solar	
Natural Gas	None	
Telephone		
Fire Protection		

24. This section provides an opportunity for you to explain the reasons why you consider the rezoning to be appropriate at this location. The attached copy of the criteria used to determine if there is a presumption in favor of or against this rezoning is attached for your reference (attach additional pages as needed).

This property is part of
an area subdivided by Horizon Land Co. in
the mid-1960s. This Area was zoned at the time
of the subdivision as TR-36.

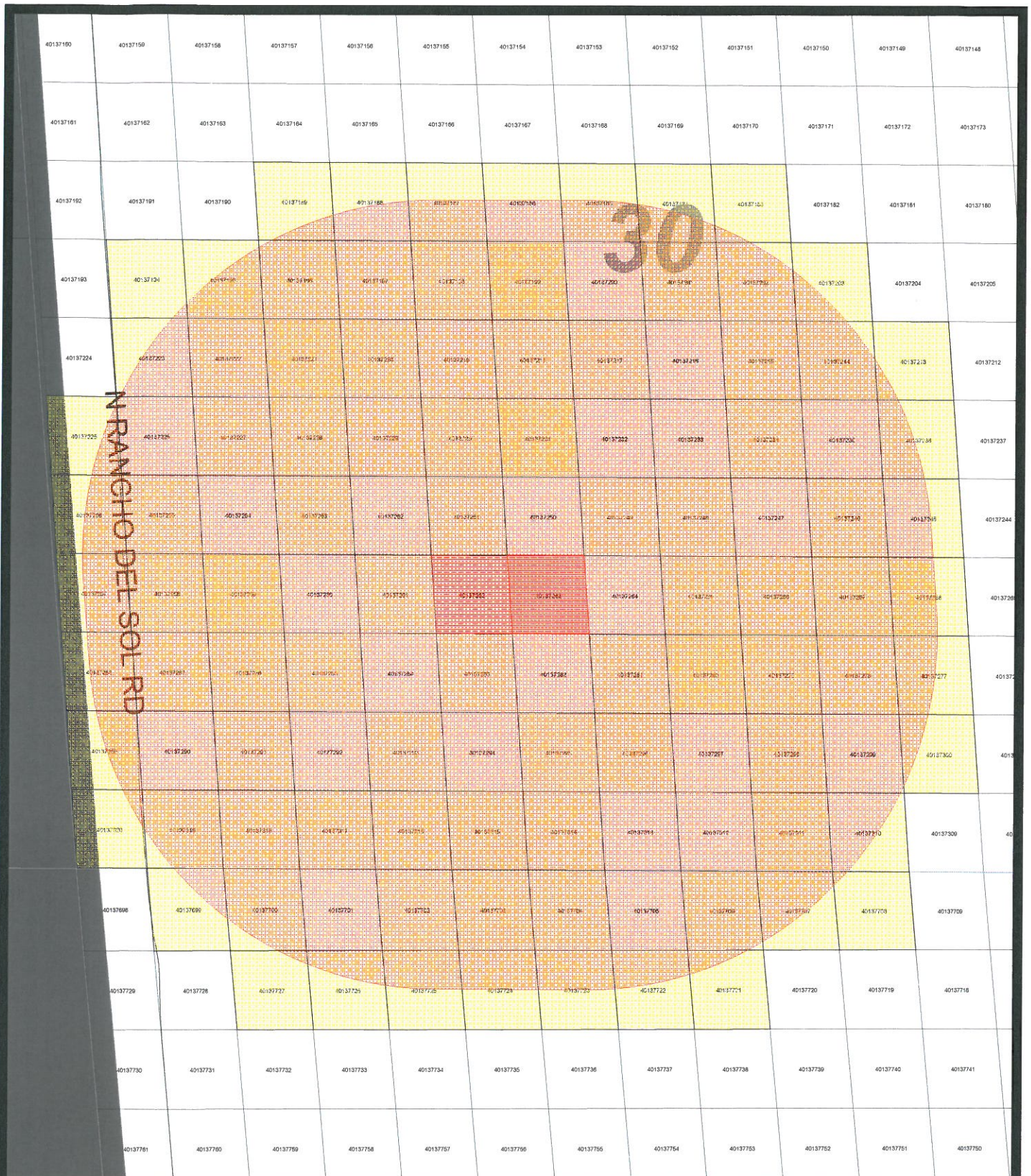
The reality of the situation is that the
proposed residential subdivision never materialized &
the land is very rural. As such, the designation
of RV-4 is more appropriate.

25. AFFIDAVIT

I, the undersigned, do hereby file with the Cochise County Planning Commission this petition for rezoning. I certify that, to the best of my knowledge, all the information submitted herein and in the attachments is correct. I hereby authorize the Cochise County Planning Department staff to enter the property herein described for the purpose of conducting a field visit.

Applicant's Signature: _____

Date: _____



Docket Z-12-01
(Hodai)
1,500-foot buffer

This map is a product of the
Cochise County GIS

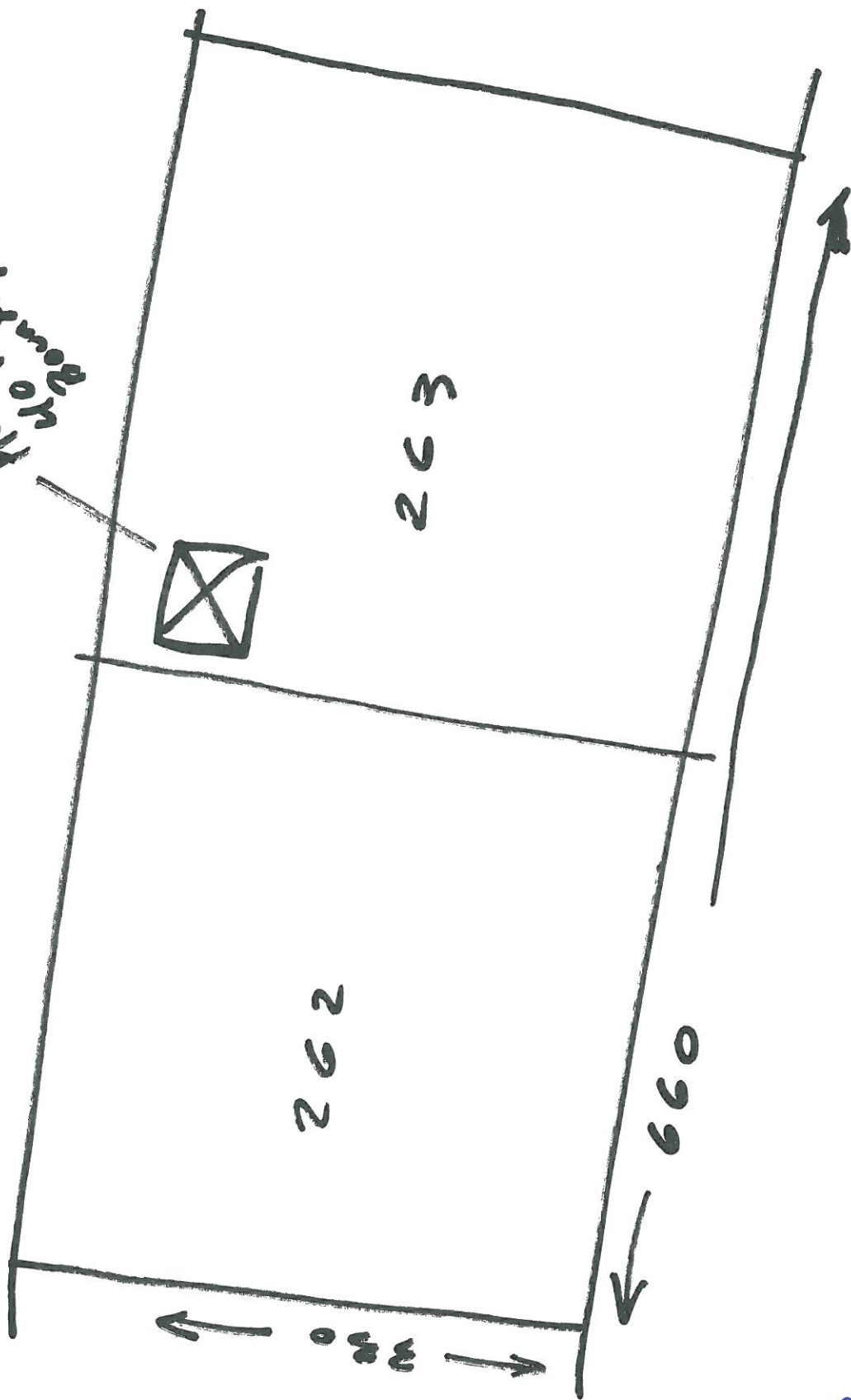


0' 1" = 583'

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N

House, approx
40 feet from N
boundary



REZONING: Docket Z-12-01 (Hodai)

____ YES, I SUPPORT THIS REQUEST

Please state your reasons: Our support is conditional upon the
intended use of these parcels of land providing ~~the~~ livestock
or poultry production of any kind including cattle or Hog feed lots
or confinement buildings of any kind will be forever and permanently
banned from existing on this property.

____ NO, I DO NOT SUPPORT THIS REQUEST:

Please state your reasons: We don't support re-zoning to RU-4 if
any of the above stated uses will be allowed at any
time, now or ever in the future.

(Attach additional sheets, if necessary)

PRINT NAME(S): David Nicholas Joyce Nicholas

SIGNATURE(S): David Nicholas By Joyce Nicholas (trustee)
Joyce Nicholas P.O.A. + Trustee

YOUR TAX PARCEL NUMBER: 40137287 (the eight-digit identification number found on the tax statement from the Assessor's Office)

YOUR ADDRESS 2635 No. 65th. street - Lincoln, Nebraska 68507

Upon submission of this form or any other correspondence, it becomes part of the public record and is available for review by the Applicant or other members of the public. **Written comments must be received by our Department no later than 4 PM on March 5, 2012 if you wish the Commission to consider them before the March 14, 2012 meeting. We can not make exceptions to this deadline. However, if you miss the written comment deadline you may still make a statement at the public hearing listed above. NOTE: Please do not ask the Commission to accept written comments or petitions at the meeting, as they do not have sufficient time to read materials at that time. Your cooperation is greatly appreciated.**

RETURN TO: Keith Dennis

Cochise County Planning Department
1415 Melody Lane, Building E
Bisbee, AZ 85603
Email: kdennis@cochise.az.gov
Fax: (520) 432-9278

COCHISE COUNTY

FEB 28 2012

PLANNING

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REZONING: Docket Z-12-01 (Hodai)

COCHISE COUNTY

FEB 20 2012

PLANNING

 YES, I SUPPORT THIS REQUEST

Please state your reasons: _____

 X NO, I DO NOT SUPPORT THIS REQUEST:

Please state your reasons: _____

(Attach additional sheets, if necessary)

PRINT NAME(S):

GEORGE Stephens

SIGNATURE(S):

George Stephens

YOUR TAX PARCEL NUMBER:

401-37-318

(the eight-digit identification number found on the tax statement

from the Assessor's Office)

YOUR ADDRESS _____

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REZONING: Docket Z-12-01 (Hodai)

☒ YES, I SUPPORT THIS REQUEST

Please state your reasons:

Bring Power closer to my property. (Utilities)

☐ NO, I DO NOT SUPPORT THIS REQUEST:

Please state your reasons:

(Attach additional sheets, if necessary)

PRINT NAME(S):

Jeanette & Robert Tiller

SIGNATURE(S):

Jeanette M. Tiller

YOUR TAX PARCEL NUMBER: *401-37-310 4* (the eight-digit identification number found on the tax statement from the Assessor's Office)

YOUR ADDRESS *6066 So. River Rd. Douglasville, GA 30135*

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COCHISE COUNTY

FEB 27 2012

PLANNING

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REZONING: Docket Z-12-01 (Hodai)

☐ YES, I SUPPORT THIS REQUEST

Please state your reasons: _____

☒ NO, I DO NOT SUPPORT THIS REQUEST:

Please state your reasons: _____

only benefits the requester

(Attach additional sheets, if necessary)

PRINT NAME(S):

JANET M STEWART

SIGNATURE(S):

YOUR TAX PARCEL NUMBER: *401-37-262 + 263* (the eight-digit identification number found on the tax statement from the Assessor's Office)

YOUR ADDRESS *110 IMPERIAL DR THOMASVILLE GA 31792*

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COCHISE COUNTY

MAR 02 2012

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